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#3

PTO/SD/01 (12-97)

Approved for use through 9/30/00. OMB 0651-0032
Patent and Trademark Office: U.S. Department of Commerce

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)	Attorney Docket Number	15215.2		
	First Named Inventor	Daniel R. McClellan		
	COMPLETE IF KNOWN			
	Application Number			
	Filing Date			
	Group Art Unit			
<input checked="" type="checkbox"/> Declaration Submitted With Initial Filing	OR	<input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) Required)	Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint invention (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Vehicle-Straightening Bench with Movable Carriages for Mounting Pulling Assemblies

(Title of the Invention)

the specification of which

☒ is attached hereto

OR

☐ was filed on (MM/DD/YYYY) _____ as United States Application Number or PCT International Application Number _____ and was amended on (MM/DD/YYYY) _____ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application (numbers)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				Yes	No
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are list on a supplemental priority data sheet PTO/SB/02B attached hereto.



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DECLARATION -- Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT international application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT
Parent Number

Parent Filing Date
(MM/DD/YYYY)

Parent Patent Number
(if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplement priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☒ Registered practitioner(s) name/registration number listed below

Name	Registration No.	Name	Registration No.
Samuel Digirolamo	29,915	Kyle L. Elliott	39,485
Rebecca J. Brandau	33,654	Sarah Pfeifer Vaz	34,747
Robert J. Lewis	27,210	Mark E. Stallion	46,132
Lawrence E. Evans, Jr.	29,531		

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☒ Correspondence address below

Name	Kyle L. Elliott				
Address	Blackwell Sanders Peper Martin LLP				
Address	2300 Main Street, Suite 1000				
City	Kansas City	State	MO	ZIP	64108
Country	USA	Telephone	(816) 983-8000	Fax	(816) 983-8080

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of first Inventor:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle [if any])

Family Name or Surname

Daniel R.

McClellan

Inventor's Signature						Date	8 JAN 02
Residence: City	Grand Island	State	NE	Country	USA	Citizenship	USA
Post Office Address:	4260 W. Capital Ave.						
City:	Grand Island	State	NE	Zip	68803	Country	USA

☒ Additional inventors are being named on the attached supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.



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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page 1 of 3
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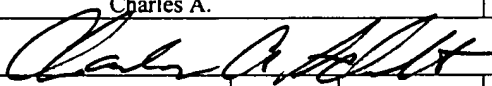
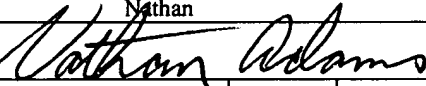
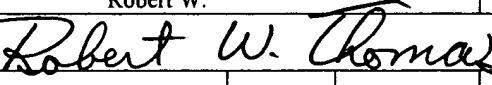
Name of Additional Joint Invention, If any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any]) Richard H.				Family Name or Surname Nagorski			
Inventor's Signature	<i>Richard H Nagorski</i>					Date	1/9/02
Residence: City	Grand Island	State	NE	Country	USA	Citizenship	USA
Post Office Address:	103 W. 16 St.						
Post Office Address:							
City:	Grand Island	State	NE	Zip	68801	Country	USA
Name of Additional Joint Invention, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any]) Jeffrey L.				Family Name or Surname Dobbins			
Inventor's Signature	<i>Jeffrey L Dobbins</i>					Date	1-7-02
Residence: City	Grand Island	State	NE	Country	USA	Citizenship	USA
Post Office Address:	4015 Mason Ave.						
Post Office Address:							
City:	Grand Island	State	NE	Zip	68803	Country	USA
Name of Additional Joint Invention, If any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any]) Jeffery A.				Family Name or Surname Hess			
Inventor's Signature	<i>Jeffery A. Hess</i>					Date	1-8-2002
Residence: City	Grand Island	State	NE	Country	USA	Citizenship	USA
Post Office Address:	2411 N. Kruse, #4						
Post Office Address:							
City:	Grand Island	State	NE	Zip	68803	Country	USA

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, D.C. 20231. DO NOT SENT FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

KC-920724-1

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DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page 2 of 3
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Name of Additional Joint Invention, If any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any]) Charles A.				Family Name or Surname Schulte			
Inventor's Signature				Date	1/10/02		
Residence: City	Omaha	State	NE	Country	USA	Citizenship	USA
Post Office Address:	5722 S. 180 56 th						
Post Office Address:							
City:	Omaha	State	NE	Zip	68135	Country	USA
Name of Additional Joint Invention, If any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any]) Nathan				Family Name or Surname Adams			
Inventor's Signature				Date	1/15/02		
Residence: City	Littleton	State	CO	Country	USA	Citizenship	USA
Post Office Address:	8378 Upham Way, A305						
Post Office Address:							
City:	Littleton	State	CO	Zip	80123	Country	USA
Name of Additional Joint Invention, If any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any]) Robert W.				Family Name or Surname Thomas			
Inventor's Signature				Date	1/8/02		
Residence: City	Grand Island	State	NE	Country	USA	Citizenship	USA
Post Office Address:	457 D Road						
Post Office Address:							
City:	Grand Island	State	NE	Zip	68801	Country	USA

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ADDITIONAL INVENTOR(S)

Supplemental Sheet

Page 3 of 3

Name of Additional Joint Invention, If any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Marco Tulio Nossa				Reyes			
Inventor's Signature		<i>Marco Tulio Nossa</i>		Date			
Residence: City		Colonia Villa Verdun	State	CP	Country	Mexico D.F.	Citizenship
Post Office Address:		Reims 66					
Post Office Address:							
City:		Colonia Villa Verdun	State	CP	ZIP	01810	Country
							Mexico D.F.
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Inventor's Signature				Date			
Residence: City			State	NE	Country	USA	Citizenship
Post Office Address:							
Post Office Address:							
City:			State	NE	Zip		Country
							USA
Name of Additional Joint Invention, If any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Inventor's Signature				Date			
Residence: City			State		Country		Citizenship
Post Office Address:							
Post Office Address:							
City:			State		Zip		Country

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, D.C. 20231. DO NOT SENT FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.